

**NC Division of Aging and Adults Services (DAAS)**  
**NC Area Agencies on Aging (AAAs)**  
**Monitoring Tool for entities receiving Title IIID**  
**Disease Prevention and Health Promotion Funds (ARMS Service Code 401)**

Provider Agency \_\_\_\_\_  
 Date of Assessment \_\_\_\_\_  
 Agency Staff Interviewed \_\_\_\_\_  
 Interviewer \_\_\_\_\_

**Effective July 1, 2012, Title III Part D Section 361 of the Older Americans Act (OAA), which pertains to Disease Prevention and Health Promotion Services, indicates that funds must be used only to support programs and activities that have been demonstrated through rigorous evaluation to be evidence-based and effective.**

*Guidance provided in Administrative Letter 14-05: <http://www.ncdhhs.gov/aging/admltrs/2014/DAAS-14-05.pdf> reflecting the changes made to the Title IIID Standards: <http://www.ncdhhs.gov/aging/svcstd/iiid.pdf>. Guidance is also available on AoA's website: [http://www.aoa.gov/AoARoot/AoA\\_Programs/HPW/Title\\_IIID/index.aspx](http://www.aoa.gov/AoARoot/AoA_Programs/HPW/Title_IIID/index.aspx).*

**I. METHOD OF SERVICE**

Are Title IIID funds being used appropriately using the U.S. Administration on Aging (AoA) graduated criteria known as “tiers” to define evidence-based interventions? Title IIID funds may be used to support Area Agency on Aging (AAA) staff who coordinate and support the implementation of evidence-based programs in their region.

Yes\_\_\_\_\_ No\_\_\_\_\_

Describe exactly how Title IIID funds are being utilized.

<b>Evidence-based Program</b>	<b>yes</b>	<b>no</b>
A Matter of Balance		
Chronic Disease Self-Management Program (CDSMP/Living Healthy)		
Diabetes Self-Management Program (DSMP/Living Healthy with Diabetes)		
Tomando Control de Su Salud (Spanish CDSMP)		
Positive Self-Management Program for HIV (PSMP)		
Chronic Pain Self-Management Program (CPSMP)		
Healthy IDEAS (Identifying Depression, Empowering Activities for Seniors)		
Fit and Strong!		
Walk with Ease		
Arthritis Foundation Life Series Programs ( <i>Exercise, Tai Chi, Aquatics Programs</i> )		
Powerful Tools for Caregivers		
Tai Chi: Moving for Better Balance		
Senior Games		
Laughter Yoga		
Eat Smart, Move More, Weigh Less		
Other (describe)		
Other (describe)		
Other (describe)		

## II. CLIENT ELIGIBILITY

Persons served are at least 60 years of age or older, or spouses and/or caregiver of any age are served (*based on attendance logs, observation, etc.*)?

Yes \_\_\_\_ No \_\_\_\_

## III. PROGRAM INTEGRITY

a. Is there evidence that Title IIID funds are being utilized to purchase medical service, prescription drugs, home safety devices or activities of daily living supply items?

Yes \_\_\_\_ No \_\_\_\_ If yes, describe below

b. Is there evidence that Title IIID funds are being utilized for services which are paid for by Medicare (*such as flu shots, mammograms, pap smears, laboratory services, durable medical equipment*)?

Yes \_\_\_\_ No \_\_\_\_ If yes, describe below

c. Is there evidence that Title IIID funds are being utilized for activities that are strictly recreational in nature? That is they are offered only for amusement (*such as movies, video games, Bingo*).

Yes \_\_\_\_ No \_\_\_\_ If yes, describe below

d. Are programs offered by appropriately trained leaders, coaches, or instructors? It is essential that workshops are conducted with fidelity.

Yes \_\_\_\_ No \_\_\_\_ I don't know \_\_\_\_ If no, describe below

## IV. CONSUMER CONTRIBUTION

Consumer Contribution guidance provided in Administrative Letter 06-11:

<http://www.ncdhhs.gov/aging/admltrs/2006/DAAS-06-11.pdf> and on DAAS' Consumer Contributions Policies and Procedures web page: <http://www.dhhs.state.nc.us/aging/consumercontributions.htm>).

Agency records show they have procedures to enable participants to contribute to services and a system for collecting, depositing and recording program income/consumer contributions (*e.g. written policy, records of consumer contributions*)?

Yes \_\_\_\_ No \_\_\_\_

## **V. REIMBURSEMENT METHODS**

a. Agency records show that expense forms are maintained and accurately reflect Title IIID funds utilized. Documentation shows allowable expenditures and request for reimbursement for non-unit services (*e.g., copies of supporting documents: invoices, purchase orders, employee time records /date submitted*)?

Yes \_\_\_\_ No \_\_\_\_ N/A \_\_\_\_

**Briefly describe expenses: (e.g. salary/fringe, supplies, materials, license, stipend, travel, other)**

b. Agency records show that the amount of Title IIID funds spent to-date agrees with ARMS amount (*e.g., compare agency amounts with AAA ZGA370-7, Provider Reimbursement Report for Title III D*)?

Yes \_\_\_\_ No \_\_\_\_